

Fire Chief/Designee/Health Officer/Building Inspector

TOWN OF STRATHAM

INCORPORATED 1716

10 BUNKER HILL AVENUE • STRATHAM NH 03885

VOICE (603) 772-7391 • FAX (603) 775-0517

REQUEST FOR INSPECTION BY

STRATHAM FIRE CHIEF	HEALTH OFFICER	BUILDING INSPECTOR_
Permit #	Map Lot	Zone
	Street Address of Inspection/E	Event
Check Type of Inspection (please check	ck all that apply):	
Blasting/Explosives Chan	ge of Occupant/Use C	Cistern Cert. of Occupancy
Day Care Fire Alarm/S	prinkler Fireworks I	Displays Foster Care
Place of Assembly Pre-	-Inspection Restaura	ant Rooming/Lodging
School Tent V	ent Free Appliance We	elding Operations Other
Date Inspection needed by:	Date	& Time of Event:
Inspection Fee: \$_75.00 per visit/ins**(Note some projects may require more to		Cash/Check #
Applicant Information (please prin	nt)	
Contact Name	Phone #	Email address
Mailing Address	City/Town	State & Zip
Owner or Authorized Agent Signature	2	Date
authorized by the owner to make t	**	ned property, or that I have been their authorized agent. **Please note that ement Office at (603) 772-7391 ext. 180
an inspections are to be scheduled		
Conditions of this approval:		

Date